



Agency Benefits Coordinator Meeting

Benefits 101

August 2018

Commonly Used BA Acronyms

ABC	Agency Benefits Coordinator
ACH	Automated Clearing House
ADM	Administrative
AE	Annual Enrollment
BA	Benefits Administration
BEP	Basic Education Plan
BIL	Direct Billing
CC	Corrections and Clarification form
CNP	Cancel for Non-Payment
COCC	Certificate of Credible Coverage
CR	Cancel request
CSA	Central State Agency
DEP	Dependent
DIV	Divorce
DNTL	Dental

DOB	Date of Birth
DOR	Date of Retirement
EAP	Employee Assistance Program
EBB	End Benefits Billing
EE	Employee
ELIG	Eligibility
ER	Employer
FSCM	Accounting Side of Edison
HED	Higher Education
HCM	Benefits (HR) Side of Edison
HIPAA	Health Insurance Portability and Accountability Act
IC	Insurance Committee
LE	Local Education
LG	Local Government

Commonly Used BA Acronyms

LOA	Leave of Absence
MAC	Maximum Allowable Change
MED	Medical
MED SUPP	Medicare Supplement
MSC	Miscellaneous
OBF	Office of Business and Finance
OE	Open Enrollment
One Ded	One-time Deduction
OSA	Optional Special Accident
OOS	Out of Sequence
PPO	Preferred Provider Organization
PPACA	Patient Protection and Affordable Care Act
PY	Payroll

REH	Rehire
RET	Retirement
RFL	Return from Leave
SBB	Start Benefits Billing
SLB	Sick Leave Bank
SQE	Special Qualifying Event
SUS	Suspend
TBR	Tennessee Board of Regents
TER	Termination
UT	University of Tennessee
VIS	Vision
W/C	Workers Comp

About the Plan

- The State Group Insurance Program covers three different populations (called entities):
 - State and Higher Education Employees
 - Local Education Employees
 - Local Government Employees
- \$1.6 billion annually and covers nearly 300,000 members
- The health plan is **self-insured** – The State (not an insurance company) pays claims from premiums collected from members and their employers
- Benefits Administration manages the State Group Insurance Program and works with Agency Benefits Coordinators (ABCs) in the agencies to serve plan members

Health Benefits



Common Terms



Out of Pocket
Maximum



Coinsurance



Premium



Copay

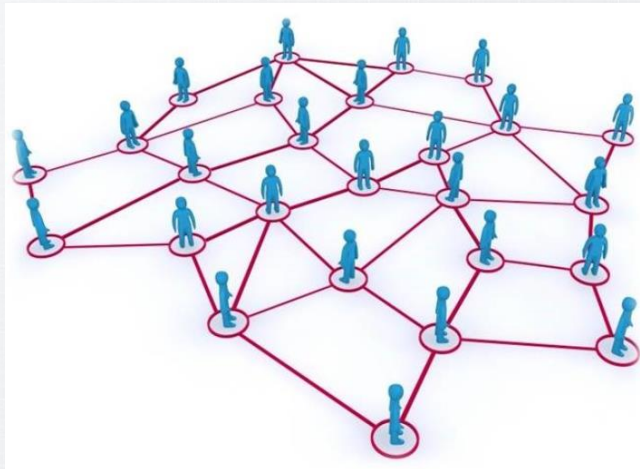


Deductible

What is a Network?

A group of doctors, hospitals and other healthcare providers, that have an agreement with a carrier.

- Services are provided at set fees that are discounted rates
- In-network providers cost less



Networks

Employees have the choice of three networks of doctors and facilities. Please ensure that employees check the network for their providers as changes can occur

- BlueCross BlueShield Network S
- Cigna LocalPlus (LP)
- Cigna Open Access Plus (OAP)- this is a larger, broad network but costs much more each month



Plans

- State offers three health plan options:
 - Premier PPO
 - Standard PPO
 - CDHP/HSA
- A PPO is a Preferred Provider Organization
- How a PPO Works:
 - Members have access to a network of doctors and facilities that charge a pre-negotiated fees
 - The member may pay **more** for services from **out-of-network** providers



Premier and Standard Plans

Premier	Standard
Higher premium Lower deductible 10% coinsurance	Lower Premium Higher deductible 20% coinsurance



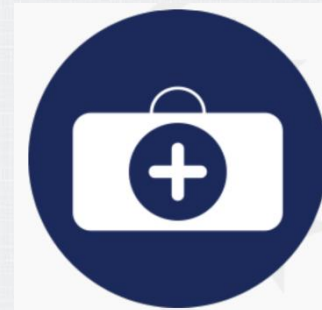
2019 Premiums

HEALTH PREMIUMS

	BCBST & CIGNA LOCAL PLUS	CIGNA OPEN ACCESS	EMPLOYER SHARE
PREMIER PPO			
Employee Only	\$136	\$176	\$543
Employee + Child(ren)	\$204	\$244	\$814
Employee + Spouse	\$284	\$364	\$1,140
Employee + Spouse + Child(ren)	\$352	\$432	\$1,411
STANDARD PPO			
Employee Only	\$92	\$132	\$543
Employee + Child(ren)	\$139	\$179	\$814
Employee + Spouse	\$195	\$275	\$1,140
Employee + Spouse + Child(ren)	\$241	\$321	\$1,411

HEALTH PREMIUMS

	BCBST & CIGNA LOCAL PLUS	CIGNA OPEN ACCESS	EMPLOYER SHARE
CDHP/HSA*			
Employee Only	\$60	\$100	\$543
Employee + Child(ren)	\$89	\$129	\$814
Employee + Spouse	\$125	\$205	\$1,140
Employee + Spouse + Child(ren)	\$154	\$234	\$1,411



Telehealth

You can talk to a doctor by phone or computer from anywhere, at anytime.

When to use Telehealth

- For non-emergency medical issues(allergies, asthma, bronchitis, cold & flu, infections, fever, ear aches, nausea, pink eye, sore throat)
- 24 hours a day, seven days a week-including nights, weekends, and holidays
- Your doctor or pediatrician is unavailable
- You are traveling and need medical care

State-Sponsored Telehealth program cost

- PPO Members: Copay is \$15 (in-network)
- CDHP Members: You pay the negotiated rate per visit until you reach your deductible, then the primary care office visit coinsurance applies
- In order to utilize this service they must pre-register with their network carrier (BCBST or Cigna) and go through the network carrier programs (PhysicianNow, MDLive, or Amwell)

Pharmacy Benefits



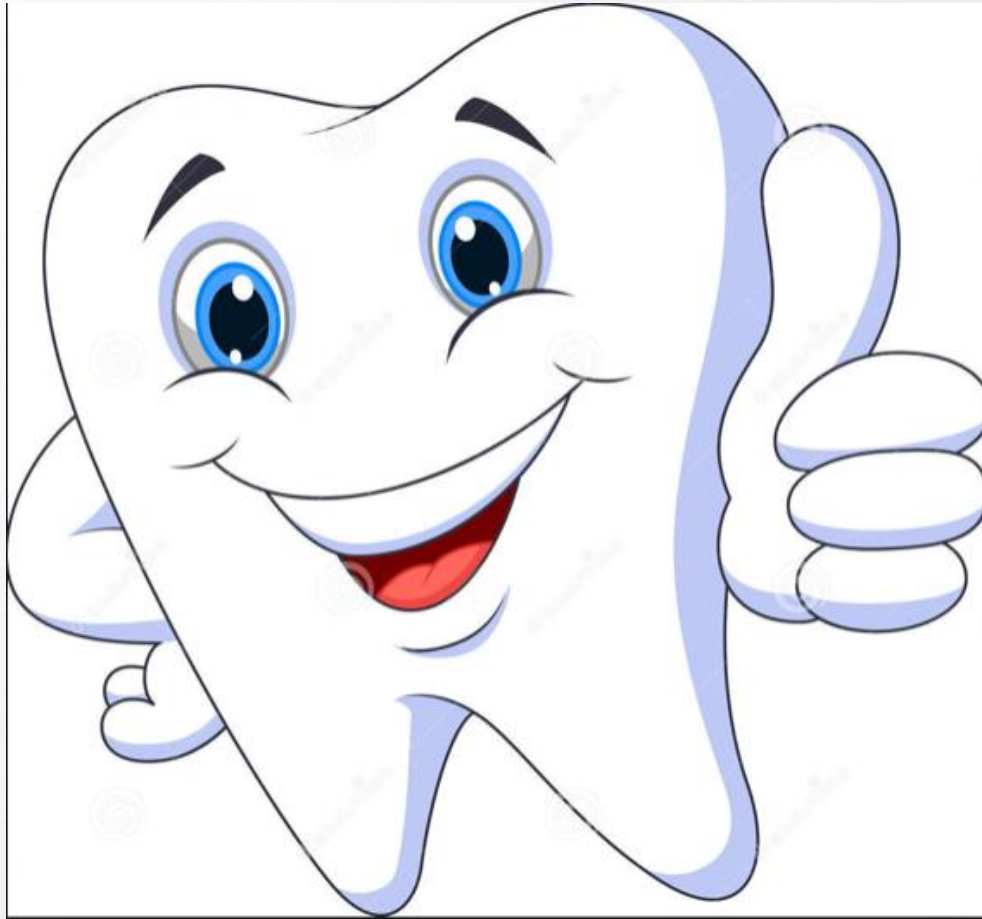
Pharmacy Benefits

- Pharmacy benefits are included when enrolled in a health plan.
- Out of Pocket Pharmacy costs is based on two different factors:
 - The member's plan option, and
 - The drug level (tier) of the medication
- There are four drug levels:

Generic Drug (Tier One)	Least Expensive	A generic medicine is FDA approved and equal to the brand name product in safety, effectiveness, quality and performance.
Preferred Brand (Tier Two)	More Expensive	Many popular and highly used preferred brands are included on the preferred drug list (PDL).
Non-Preferred Brand (Tier Three)	Most Expensive	These belong to the most expensive group of drugs. These drugs are not included on the PDL.

Specialty drug tier: In the PPOs, 10% coinsurance applies with a member minimum (\$50, unless the drug cost is under \$50, then you would pay the full cost of the drug) and a maximum (\$150) out-of-pocket. Members enrolled in a CDHP pay coinsurance for specialty drugs.

Dental Benefits



Optional Dental Benefits

Eligible State employees can choose between two dental plans:

Cigna Prepaid Plan

- Participating dentists only
- Fixed co-pays
- No deductibles
- No waiting periods
- Pre-existing conditions are covered
- Referrals to specialist are required
- Orthodontic treatment is not covered if the treatment plan began prior to the member's effective date of coverage with Cigna

MetLife DPPO Plan

- Any dentist
- Pay less with in-network providers
- Pay co-insurance for basic, major, orthodontic and out-of-network covered services.
- Some services require a waiting period
- Referrals to a specialists are not required

- Each year during the Annual Enrollment, eligible employees can enroll in or transfer between dental options
- Unlike health insurance where a portion of the premium is paid by the employer, dental insurance is paid 100% by the member

2019 Dental Premiums

2019 MONTHLY DENTAL PREMIUMS	CIGNA PREPAID PLAN	METLIFE DPPO PLAN
ACTIVE MEMBERS		
Employee Only	\$13.44	\$23.64
Employee + Child(ren)	\$27.91	\$54.36
Employee + Spouse	\$23.83	\$44.72
Employee + Spouse + Child(ren)	\$32.76	\$87.50

Vision Benefits



Optional Vision Insurance

Eligible State employees can choose between two vision plans:

Basic Plan

- Discounted rates
- Allowances

Expanded Plan

- Co-pays
- Allowances
- Discounted rates

- Administered by Davis Vision
- For a specific provider go to <http://www.davisvision.com/stateofTN>
- Each year during the Annual Enrollment, eligible employees can enroll in or transfer between vision plans
- Unlike health insurance where a portion of the premium is paid by the employer, vision insurance is paid 100% by the member

2019 Vision Premiums

2019 MONTHLY VISION PREMIUMS	BASIC PLAN	EXPANDED PLAN
ACTIVE MEMBERS		
Employee Only	\$3.07	\$5.56
Employee + Child(ren)	\$6.13	\$11.12
Employee + Spouse	\$5.82	\$10.57
Employee + Spouse + Child(ren)	\$9.01	\$16.35

Life Insurance Benefits



Life Insurance Benefits

- State and Higher Education Agencies:
 - Basic Term Life
 - \$20,000 provided to all employees
 - Basic Accidental Death & Dismemberment Insurance
 - \$40,000 provided to all employees



Life Insurance Benefits

Voluntary Term Life Insurance

- If employees qualify, they can purchase additional Voluntary Term Life Insurance coverage for themselves and their dependents. They may enroll in this coverage regardless of whether they are enrolled in health coverage.

For more information contact:

[Securian-lifebenefits.com/stateoftn](https://securian-lifebenefits.com/stateoftn) or call 866.881.0631



Disability Insurance



Disability Insurance

- Disability benefits are offered to full-time state and higher education employees through MetLife. Premiums will stay the same in 2019. Employees will pay the premium.
- Short Term Disability (STD): Replaces a portion of your income during a disability, which could last up to 26 weeks.
- Long Term Disability (LTD) (**state employees only**): Replaces a portion of your income during a disability that is expected to last longer than 90 days-180 days.

Disability Insurance

- During annual enrollment, employees can apply for enrollment or increase coverage if currently enrolled.
- Employees can select a benefit option under STD and/or LTD (if eligible) and answer five medical questions by completing the form linked in Edison that is on the MetLife website. Employees must send completed form to MetLife as directed on the form.
- Find more information, including how to calculate your rates, at tn.gov/partnersforhealth on the **Disability** webpage under **Other Benefits**. Monthly premium rates will also be in Edison.
- Contact MetLife, 855.700.8001, M-F, 7a.m. -10 p.m. or metlife.com/StateofTN



Flexible Spending Accounts



Flexible Spending Accounts

- Reduce your taxable income and save money
- Set aside pre-tax earnings to pay for eligible expenses
 - Medical FSA (State and Higher Education)
 - Limited Purpose FSA (State and Higher Education)
 - Dependent day care FSA (State and Higher Education)
 - Parking FSA (State)
 - Transportation FSA (State)
- State Employees can enroll in FSA in Edison
- Higher Education Employees have to enroll through their institution/Payflex



Flexible Spending Accounts

Medical-FSA

- Contribute up to \$2,650 for 2019
- Carry over limit \$500.00
- Used to pay for certain medical, dental, vision and prescription costs not covered by insurance
- **Cannot be enrolled in CDHP/HSA**

Limited Purpose-FSA

- Contribute up to \$2,650 for 2019
- Carry over limit \$500.00
- Used for dental and vision expenses only
- **For participants enrolled in the CDHP/HSA**

- Cannot enroll in both Medical FSA and Limited FSA in the same year
- New Employees have 31 days to enroll or they can enroll during AE
- Must re-enroll during AE each year to continue participation
- Members will get a debit card to use their funds

Flexible Spending Accounts

Dependent Care-FSA

- Annual Limit \$5,000.00 per year (up to \$2,500.00 per spouse for married couples filing jointly)
 - No carry over amounts
 - Used to pay for certain dependent-care costs, such as after school care, baby-sitting fees, adult or child daycare and preschool for children under 13
-
- New Employees have 31 days to enroll or they can enroll during AE
 - Must re-enroll during AE each year to continue participation
 - Money in a Dependent Care-FSA must be used each year or the member will lose it

Availability of Funds

- Employees who enroll in a medical FSA or L-FSA during annual enrollment will have their full election amount available to them the first week of January, or within approximately 3-4 weeks after they enroll.
- DC-FSA funds are only available as they are taken from your paycheck; your full election amount is not available up front. In addition, you may only file claims for dependent care for which you have a sufficient amount in your account to pay for them.



Flexible Spending

Transportation and Parking-FSA

- Used to pay for certain work related and or parking expenses.
- State employees who have a transportation/parking FSA must submit current year claims by April 30th of the following year.
- Employees may enroll, change or cancel at any time throughout the year

Enrollment



Online Enrollment through ESS

- ❖ Members select health insurance and other benefit options online
- ❖ Log in to Edison www.edison.tn.gov
 - » Edison employee ID number provided by the Agency Benefits Coordinator
 - » Employees can utilize the First Time User/Password Reset link on the homepage to retrieve their access ID and password
 - » Select Self Service and follow prompts for enrollment
 - » A step-by-step guide is available on the ABC website
- ❖ If covering dependents, submit dependent verification by:
 - » Uploading electronic documentation via ESS
 - » Submit documents via document upload in Zendesk

When Will Cards Arrive?

BlueCross BlueShield

- Will send up to two ID cards automatically, both with the member's name
- These may be used by any covered dependent

Cigna

- Will send separate ID cards for each insured family member with each participant's name
- There may be up to four ID cards in each envelope

- **CVS Caremark** will send separate ID cards for your pharmacy benefits (Note: each family member's card may arrive in a separate envelope)
- If enrolled in dental or vision benefits, the employee will also receive their ID cards within three weeks
- New employees and employees that change or transfer plans will receive new cards
- Members can always request additional cards by contacting the vendor

Questions?